| PATENT ADDITION SEE DESCRIPTION   |  |                    |  | Application or Docket Number                     |  |     |  |
|---|--|--------------------|--|--|--|-----|--|
| Effective October 1, 2000   |  |                    | 09/966,845                                       |  |  |     |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                      |  |                    | ENTITY   | OTHE   | R THAN   | 1   |  |
| TOTAL CLAIMS  |  | TYPE               |  | _  | LENTITY  | 4   |  |
| FOR NUMBER FILE   | NUMBER EXTRA                               | BASIC              |  | RATE<br>OR BASIC FE                              |  | -   |  |
| TOTAL CHARGEABLE CLAIMS / minus 2   | 0= .59                                     | X\$ 9              |  |  | 7 7 10.00  | ,   |  |
| INDEPENDENT CLAIMS 5 13 minus   | 3 = 8                                      | X40=               | 1  | OR X\$18=  | <del> </del>                                     | -   |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  | 140                | 520  | OR X80=  |  | -   |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2            |  |                    |  | )A +270=   |  |     |  |
| CLAIMS AS AMENDED - PART II   |  |                    | 130%   | OR TOTAL   |  |     |  |
| (Column 1) (Column 2) (Column 3)  |  |                    | LENTITY C  | OTHEI<br>R SMALL                                 | R THAN<br>ENTITY                                 |     |  |
| REMAINING AFTER PR  | IGHEST IUMBER PRESENT EVIOUSLY EXTRA       | RATE               | 1  | RATE   | ADDI-<br>TIONAL                                  |     |  |
| Total - 28 Minus  | 87 = 0                                     | X\$ 9=             | FEE  | D X\$18=   | FEE  | 1   |  |
| Independent Minus   | 13: -0                                     | X40=               | <del>                                     </del> | "-   | <del>                                     </del> |     |  |
| PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                      |  |                    |  |  | ₩  | ·   |  |
|   |  | +135=              |  | ·  |  |     |  |
| (Column 1) (Co  | -l   | ADDIT. FE          |  | R ADDIT, FEE                                     | 0-   |     |  |
| CLAIMS H  | Diumn 2) (Column 3) IGHEST UMBER PRESENT   |                    | ADDI-  |  | ADDI-  |     |  |
| AFTER PRE   | EVIOUSLY EXTRA                             | RATE               | TIONAL<br>FEE                                    | RATE   | TIONAL   |     |  |
| Total . & Minus   | 87 = /                                     | X\$ 9=             | 7 05   | X\$18= ,   | FGE  |     |  |
| Independent / /3 Minus FIRST PRESENTATION OF MULTIPLE DEPENDE                       | /3 = /                                     | X40=               | OF   | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \            |  |     |  |
| ·   | NI CLAIM                                   | +135=              |  | <del>                                     </del> |  |     |  |
| - 21506   | i  | TOTAL              |  |  |  |     |  |
| 531-06<br>(Column 1) (Co  | himb 01 10-time of                         | ADDIT. FEE         |  | ADDIT. FEE                                       |  |     |  |
| CLAIMS HIS<br>REMAINING NL<br>AFTER PRE   | OFFOR  COlumn 3)  COlumn 3)  PRESENT EXTRA | RATE               | ADDI-<br>TIONAL                                  | RATE   | ADDI-<br>TIONAL                                  | h:  |  |
| Total • 87 Minus •• 9   | 87 - /                                     | X\$ 9=             | FEE_/  | Vac =  | FEE  |     |  |
| Independent • / Minus •••   | 3 = /                                      |                    | OR   | X\$18=   | /  |     |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM A405 OR X80=                         |  |                    |  |  |  |     |  |
| If the entry in column 1 is less than the entry in column 2, write 'V' in column 3. |  |                    |  |  |  | • • |  |
| "If the Highest Number Previously Paid For IN THIS SPACE                            | is less than 20, enter 20.                 | TOTAL<br>DOIT, FEE | OR   | ADDIT. FEE                                       |  |     |  |
| The "Highesi Number Previously Paid For" (Total or Indepen                          | ident).is the highest-number tour          | nd in the app      | propriate box in co                              | fumo 1.  |  |     |  |